

# COUNTY OF LOS ANGELES

MARVIN J. SOUTHARD, D.S.W.  
Director

SUSAN KERR  
Chief Deputy Director

RODERICK SHANER, M.D.  
Medical Director



## BOARD OF SUPERVISORS

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## DEPARTMENT OF MENTAL HEALTH

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

Reply To: (213) 738-4601  
Fax: (213) 386-1297

<http://dmh.lacounty.info>

March 14, 2005

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.  
Director of Mental Health

SUBJECT: **MENTAL HEALTH SERVICES ACT PLANNING PROCESS UPDATE**

This is to update your Board on our ongoing Mental Health Services Act (MHSA) planning process.

Los Angeles County submitted its required "Plan to Plan" to the State on February 15, 2005. A draft copy was provided to all of the Health Deputies for input prior to this submission.

We expect to receive word of the State's approval of our plan by March 15, 2005. Following the State's approval, we will submit a Board letter requesting your Board's approval for us to proceed with the community outreach and planning activities outlined in our Plan to Plan, to be funded by \$2.9 million in MHSA funds. The Plan to Plan is designed to aggressively expand upon our outreach and engagement efforts begun last year through our Stakeholder process. Our efforts through the Plan to Plan will ensure that people who receive services, family members, and underserved populations learn how to participate in the ongoing MHSA planning efforts, and have a significant voice in shaping the substantive plans we will be required to submit under the MHSA.

While we are waiting for State approval of the planning funding, we have been gathering data from the existing workgroups listed on our web site ([www.dmh.co.la.ca.us](http://www.dmh.co.la.ca.us)). The web site provides information on all components of our planning process and provides information on how to get involved in the process. Attachment I is a copy of the cover page for the Community-Wide Stakeholder Process web site, which shows the links to specific information.

Following the Plan to Plan, counties will be required to submit and have approved five substantive plans under the MHSA. The first of these five substantive plans is the "Community Services and Supports Plan" (CSS Plan). The CSS Plan includes sub-plans focused on services and supports for children, adults, and older adults. This CSS

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plan, once approved by the State, would give Los Angeles access to approximately 55 percent of the resources allocated to us under the MHSA for FY 2005-06, which we estimate to be about \$110 million.

The remaining 45 percent of the FY 2005-06 dollars would be accessed through the successful submission of a "Prevention and Early Intervention Plan" (20 percent or an estimate of \$40 million); an "Infrastructure and Information Technology Plan" (10 percent or an estimate of \$20 million); a "Workforce Development Plan" (10 percent or an estimate of \$20 million); and an "Innovations Plan" (5 percent or an estimate of \$10 million). Guidelines for development of these plans have not yet been issued. Additionally, we will have to submit a plan to access the FY 2004-05 money allocated for Workforce Development and for Infrastructure and Information Technology. Guidelines for accessing these resources have not been released by the State.

The focus between now and June 30, 2005, will be on an intensive effort to gather as much community input as possible to produce a consensus CSS Plan using our Stakeholder Process. The goal would be to arrive at stakeholder consensus by June 30, 2005.

Once drafted, we would publish this consensus document for a 30-day public comment period as required by law under the MHSA. This comment period would take place in July 2005. Following this public comment period, we would conduct a public hearing process, also required by law under the MHSA, during the first two weeks of August. At the end of this public comment and public hearing process, Stakeholder delegates would meet in late August to review the feedback from these processes and make any necessary and appropriate changes to the plan.

This "final" version of the plan would then be submitted to the Mental Health Commission for its approval as required by the MHSA. After approval by the Mental Health Commission, the CSS Plan would be ready for review and approval by your Board in mid-September, before its submission to the State. Such a timetable is aggressive, but we believe presents a good balance between depth of engagement and speed of planning to ensure that resources are available for services and supports in Los Angeles County as soon as possible. We expect an approval process at the State level of approximately thirty days.

The State requires that we submit annual revisions to each plan we develop under the MHSA. With the first version of the CSS Plan completed in August, we would re-evaluate and make changes to the Stakeholder Process (including the selection of delegates), just as we did at the conclusion of the Budget Stakeholder Process last

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year. This will ensure that our Stakeholder process continues to evolve in ways that are best suited for the next rounds of planning required in the MHSA, including the development of the other plans as well as the improvements needed for the CSS Plan in subsequent years.

We have attached a one-page fact sheet that we developed on the community planning process (Attachment II) and a one-page MHSA Implementation Timeline developed by Pacific Clinics (Attachment III) for your information. These documents were shared with the Health Deputies at their February 2, 2005, meeting when we briefed them on the process.

We will provide monthly reports to keep your Board informed regarding future MHSA planning activities. If you have any questions or need additional information, please call me, or your staff may contact Susan Kerr at (213) 738-4108.

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#### Attachments

c: Chief Administrative Officer  
Executive Officer, Board of Supervisors  
Health Deputies  
County Counsel

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**COMMUNITY-WIDE STAKEHOLDER PROCESS****March 14, 2005**

- DMH Homepage
- General Monthly Meetings
- Geographic Planning Efforts (SAAC)
- Countywide Population Planning Efforts
- Reports and Meeting Materials
- How to get Involved
- M.H. Services Act Information

***Origin of Los Angeles County "Stakeholders"***

In Spring 2004, the Los Angeles County Department of Mental Health (DMH) faced a \$30.6 million County General Fund shortfall. Given the magnitude and implications of such a significant deficit, Los Angeles County DMH initiated an extensive process to involve a community-wide "Stakeholders" group to address the shortfall. Later in August 2004, the Los Angeles County DMH learned that it had additional ongoing and one-time dollars available and re-convened the Stakeholders delegates to decide how to allocate the funds. In November 2004, California voters approved the Mental Health Services Act (Proposition 63), which will bring significant new mental health resources to Counties and will require substantial local planning processes. Los Angeles County DMH plans to expand the role of its Stakeholders group to develop its Proposition 63 plans.

***Stakeholders Group is Large and Diverse***

Well over 500 individuals have worked to develop consensus on tough budget decisions through the "Stakeholders" process. Participants have included mental health services consumers and their families, service providers, representatives from DMH and other County Departments, courts and law enforcement agencies, housing programs, academic institutions, hospitals, and groups serving particular ethnic populations in the County.

***Stakeholders Will Help Plan for Proposition 63 Funding***

In Fall 2004, Stakeholders began discussions about the long-term needs of the County's mental health system. Delegates will continue meeting through the year and will work to develop consensus on budget recommendations for fiscal year 2005-06. Additionally, Stakeholders delegates have begun working on assessing the unmet mental health needs in the community in preparation for developing the County's Proposition 63 three-year plan, as mandated by the initiative.

In Los Angeles County, the Board of Supervisors requires all County departments to use a common set of eight geographic regions, called "Service Areas," in planning efforts. Therefore, the Los Angeles County DMH utilizes a set of Service Area Advisory Councils representing all eight regions for its service planning throughout the year. The regional Councils have been active participants in the Stakeholders process. In addition to these regional Councils, Stakeholders subcommittees have been formed across various mental health subpopulations of special interest (e.g., ethnic groups, individuals in residential care, individuals affected by suicide, individuals in the criminal justice system, individuals who are homeless).

The regional Councils and subcommittees will be working to conduct needs assessments of unmet mental health services in the County throughout the Winter months. Needs assessments will be based on a common set of questions, and will include an evaluation of service supply versus demand, as well as an evaluation of the service quality available to sub-populations and among geographic regions. The data gathered through these efforts will be the basis for Proposition 63 planning efforts, as well as local budget recommendations for fiscal year 2005-06.

**COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH  
MENTAL HEALTH SERVICES ACT (PROP 63)  
COMMUNITY PROGRAM PLANNING**

**Community Program Planning:**

The Community Program Planning component of the Mental Health Services Act (MHSA) was designed to identify the local priorities for the Community Services and Supports funds.

The Guidelines from the State for use of the Community Program Planning funds were released on January 18, 2005.

Los Angeles County was allocated up to \$2.9 million for FY 2004-05.

Allowable expenses incurred on or after January 1, 2005 can be reimbursed once approved by the State through the plan.

**Required in the Community Program Planning:**

Meaningful involvement of people receiving services and families of people receiving services

Must include outreach to underserved populations and to people who do not belong to organized advocacy groups

Participation may be compensated through stipends, wages, etc.

Provide training to allow people to meaningfully participate in planning process

Planning process must be comprehensive & representative

Planning process must be adequately staffed

**Proposed Planning Structure:**

Four countywide groups created:

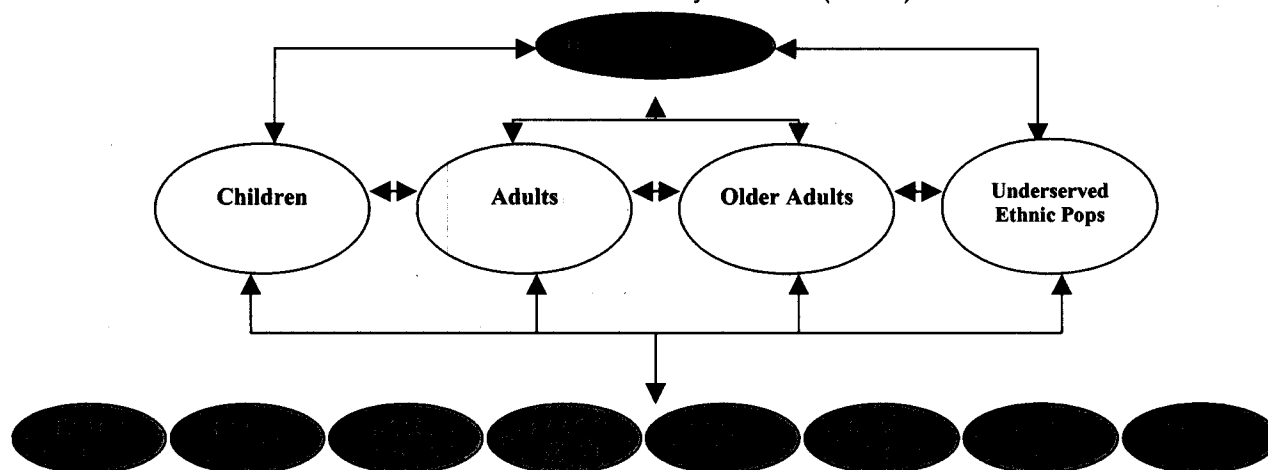
Children

Adults

Older adults

Underserved ethnic populations

Parallel structures in the 8 Service Area Advisory Councils (SAAC)



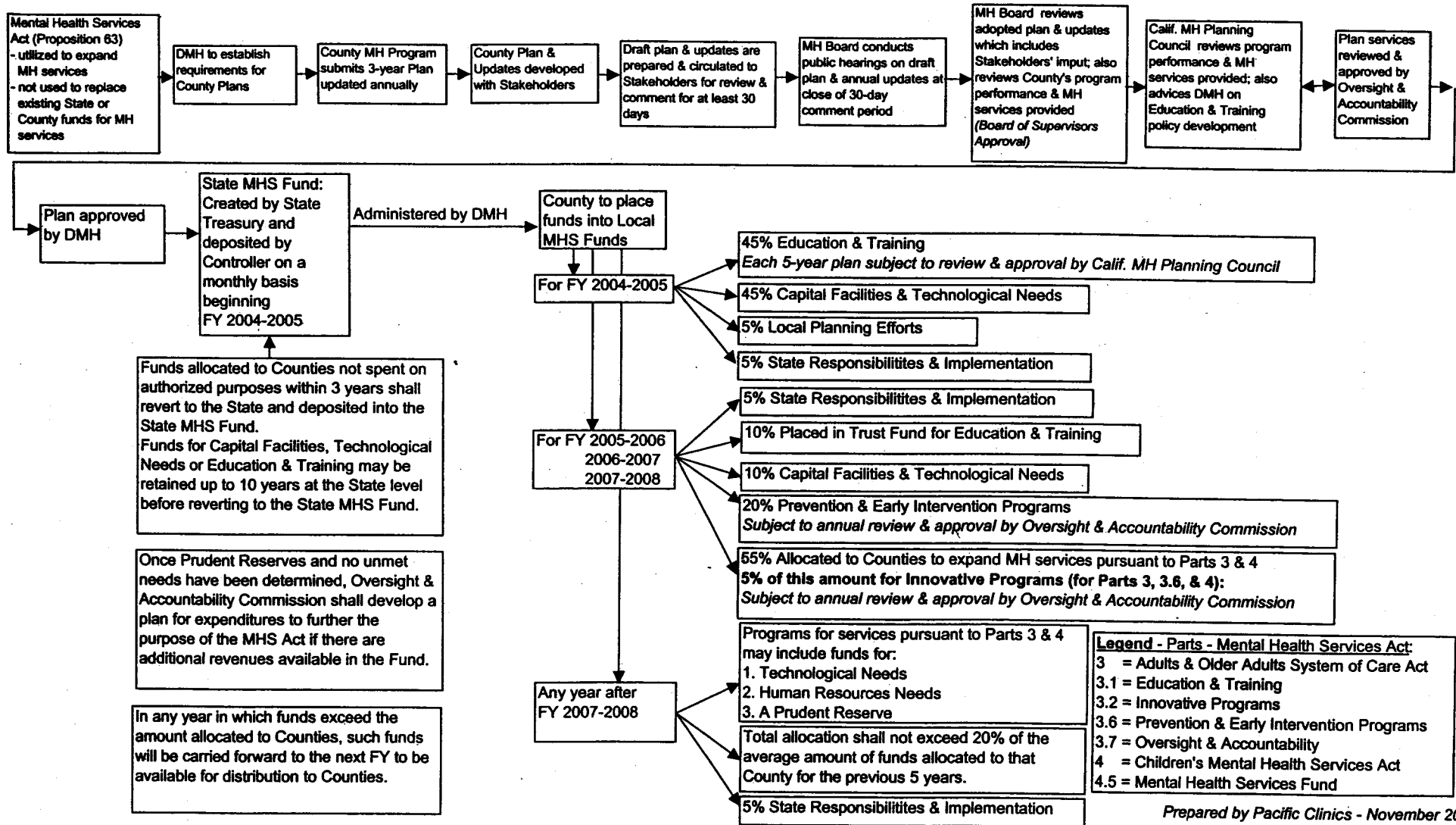
Two representatives from each SAAC will attend each of the four countywide groups  
The Community Services and Supports plans will be drafted in the four countywide groups

Other planning activities will include surveys and focus groups in various languages to ensure participation from underserved groups who have not historically attended the SAAC's

*DMH's Planning Division will coordinate all MHSA planning activities. You may contact Olivia Celis-Karim at 213-738-4644 or email [ocelis@dmh.co.la.ca.us](mailto:ocelis@dmh.co.la.ca.us) for more information.*

# **Mental Health Services Act (Proposition 63) Implementation Timeline**

Attachment III



Prepared by Pacific Clinics - November 2004  
For further questions: (714) 370-1184

## COUNTY OF LOS ANGELES

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## DEPARTMENT OF MENTAL HEALTH

<http://dmh.lacounty.info>

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

June 22, 2005

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.  
Director of Mental Health

SUBJECT: **MENTAL HEALTH SERVICES ACT PLANNING PROCESS UPDATE**

As requested by Supervisor Molina at the March 15, 2005 Board meeting, this is the first quarterly report on our ongoing Mental Health Services Act (MHSA) planning process.

Under the Mental Health Services Act, counties will be asked to submit six plans to the State for approval:

- ❖ Plan Community Program Planning Plan for planning;
- ❖ Community Services and Supports;
- ❖ Capital Facilities and Technology;
- ❖ Education and Training;
- ❖ Prevention and Early Intervention; and
- ❖ Innovation.

In late January 2005, the California Department of Mental Health (CDMH) issued guidelines for the Community Program Planning Plan. Los Angeles County was one of several counties to submit a draft plan on February 15, 2005, the State's deadline for early approval. On March 15, 2005, we received word from CDMH that our Plan to Plan was approved. Your Board approved us proceeding with the community outreach and planning activities in our Plan to Plan, to be funded by \$2.9 million of MHSA funds, on April 19, 2005.

In mid-February, CDMH issued the first draft of guidelines for the Community Services and Supports Plan (CSS Plan). The CSS Plan will include four sub-plans focused on services and supports for children, transition age youth, adults, and older adults. Once approved by the State, this CSS Plan will give Los Angeles access to approximately 55 percent of the resources allocated to us under the MHSA for Fiscal Year (FY)

*"To Enrich Lives Through Effective And Caring Service"*



2005-06.<sup>1</sup> In early June, the State released its County allocation figures for the CSS Plan. The State has allocated \$89,792,800 to Los Angeles County for a full year 1 of the CSS. It estimates a 1 percent increase in this amount for year 2, and a 7 percent increase in this amount for year 3.

Our focus from mid-February, after the submission of our Plan to Plan, until now has been to use our Plan to Plan resources to aggressively expand the outreach and engagement efforts begun last year through our Stakeholder process in order to complete a draft CSS Plan by June 30, 2005, or as close as possible to that date.

We are pursuing this aggressive timeline because State process requirements will ensure that funds will become available to Los Angeles County approximately 6 months after we complete the first draft of our plan. The comment and review process mandated by the State to follow the completion of the first draft of our CSS Plan includes:

- ❖ A 30-day public comment period, which we project to be July 2005;
- ❖ One or more public hearings sponsored by the local Mental Health Commission (and in Los Angeles County to be planned jointly with Board offices and currently projected to take place during the first two weeks in August);
- ❖ A process among the delegates to revise the plan based on the feedback that emerged from the comment period and the public hearings, currently projected to take place in the last two weeks in August;
- ❖ Submission of the revised plan for review and comment by the Mental Health Commission, currently projected to occur in early September;
- ❖ Submission of the plan to your Board for approval, currently projected to occur in late September; and
- ❖ Submission of the plan to CDMH, currently projected to occur by October 1.

CDMH estimates that it will take 90 days to review a submitted plan before the State will offer final approval. This means that, if we are able to complete our draft plan by June 30, 2005, and submit it to the State after the comment and review process by October 1, 2005, the earliest funds would be available to Los Angeles County is

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<sup>1</sup> The remaining 45 percent of the FY 2005-06 dollars will be accessed through the successful submission of the remaining 4 substantive plans: 10 percent for Capital Facilities and Technological Needs; 10 percent for Education and Training; 20 percent for Prevention and Early Intervention; and 5 percent for Innovation. Additionally, we will have to submit a plan to access the FY 2004-05 money allocated for Capital Facilities and Technology and for Education and Training. Final guidelines for accessing these resources have not been released by the State.



January 1, 2006. For each month longer it takes us to complete our draft plan, there will be an additional one-month delay in funds being available for services.

This analysis has led us to pursue a very aggressive timeline and planning process for the first CSS Plan. To date we have:

1. Completed an initial needs assessment process that engaged over 1,500 people through the Service Area Advisory Councils and more than 30 Countywide ad hoc groups. All of these groups included significant participation from people who receive services, family members, advocates, providers, representatives from the Service Areas, and County Department representatives. The process generated over 900 pages of assessments and preliminary recommendations for improving the mental health system in Los Angeles County. The reports generated from this process, including the synthesis reports completed by our consultants, are posted on our web site [www.dmh.co.la.ca.us](http://www.dmh.co.la.ca.us) or <http://dmh.lacounty.info>.
2. Conducted a series of monthly training sessions between January – March 2005 for the delegates in our Stakeholder process and other interested persons (average participation in these monthly meetings is over 200 people) about the MHSA, the various State requirements, and the Los Angeles County planning process.
3. Developed a template for community presentations translated into Spanish and Cambodian. We will complete the translation of this template into all of the threshold languages by early July 2005.
4. Begun a series of community education forums about the MHSA and how to get involved in the process. We will continue to conduct these forums through July and August in multiple languages, continuing to encourage people to get involved in this on-going process and inviting their feedback to the draft CSS plan once it is completed.
5. Provided dozens of other presentations and outreach activities at various events such as conferences, community events, school functions, etc.
6. Organized five Countywide workgroups to develop preliminary recommendations for the CSS Plan, including workgroups focused on children and their families, transition age youth, adults, older adults, and under-represented ethnic populations/inappropriately served persons from all categories. The first four workgroups parallel the four populations around which we will need to develop our CSS Plan. The fifth group was created to ensure that we effectively address

disparities among ethnic and racial communities in outcomes and access to services in accordance with a long-standing commitment of our Department, a firm desire and commitment articulated by the Stakeholder delegates at the end of our last budget process, and a State requirement for the CSS Plan.

7. Reached consensus among the delegates in our expanded Stakeholder process<sup>2</sup> on a formula to allocate the CSS funds between the four age groups. The components of this formula included general population, population in poverty, uninsured population, estimates of prevalence of serious mental illness or serious emotional disturbances within the population, and estimates of unmet need within the population.
8. Reached consensus among the delegates in our Stakeholder process on a set of principles, first recommended by the Under-represented Ethnic Populations (Inappropriately Served) workgroup, to begin to address the disparities among ethnic and racial communities in outcomes and access to services. These principles are included in Attachment I.
9. Received the preliminary recommendations from the four age-group Countywide workgroups. These workgroups have engaged in an intensive and exhausting process from the last week of April through June 10, in half-day or full-day meetings at least weekly, and toward the end of the process even more frequently. Participation in these workgroups ranged from 60 people in Older Adults to over 100 for Adults. All groups included people who receive services, family members, advocates, providers, representatives from the Service Areas, and County Department representatives. It is hard to overstate the intensity of this work over the past six weeks, or the complexity of the content and the process that had to be mastered by the participants. That these groups completed their task on time, and submitted consensus recommendations to the delegates is nothing short of remarkable. The preliminary recommendations from each of the four age-group Countywide workgroups are included in Attachment II (A-E).

Having received these preliminary reports from the Countywide workgroups, the delegates must now work to review and revise these recommendations into a draft integrated plan. In particular, the delegates will need to reach agreement about how to:

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<sup>2</sup> Forty-three delegates from 29 Stakeholder groups participated in last year's budget process. In September 2004, the delegates assessed that process and concluded that the number of Stakeholder groups should be increased to 34 and the number of delegates increased to 63. Additional representatives for people receiving services, family members, and representatives from racial and ethnic communities in Los Angeles County were the principal additions to the original delegates.



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1. Reconcile similar recommendations across the age groups;
2. Address the new State requirements regarding one-time funds under the CSS Plan<sup>3</sup>;
3. Apply the recommendations about addressing disparities across regions and among ethnic and racial populations to the funding recommendations; and
4. Develop agreement about the 3-year recommended budget for the plan, given the recently released County allocation figures.

Over the next two weeks, we will hold at least three half-day delegates meetings, and myriad ad hoc workgroup meetings, to work to complete the first draft of the CSS Plan by June 30, 2005, or as soon thereafter as possible. As soon as this draft plan is completed, we will forward copies to your offices and begin the thirty-day process of soliciting community feedback and comment.

We will continue to keep your Board informed regarding future MHSA planning activities. If you have any questions or need additional information, please call me, or your staff may contact Susan Kerr at (213) 738-4108.

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Attachments

- c: Chief Administrative Officer  
Executive Officer, Board of Supervisors  
Health Deputies

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<sup>3</sup> In the first CSS guidelines issued by the State in February, CDMH indicated that counties would receive funds through a "rolling" process that would begin when their plan was approved. In the revised guidelines issued on May 18, 2005, CDMH changed its position and stated that funds would be made available to counties on a fiscal year basis beginning July 1, 2005. Since the earliest Los Angeles County (or any County) is likely to receive funds is January 2006 (see analysis on page 2 above), this means that there will be some amount of funds from the first year that the County would have access to but which would not be accounted for by its plan. The State will allow the counties to use some portion of these first-year funds as one-time funds and is now in the process of finalizing guidelines for the use of these funds.